DATE		OPERATOR				LEASE
LOCATION	SECTION(S)	Т	TWP RNG			COUNTY
LEASE		WELL NO.	WATER BBLS.	WATER TYPE*	DISPOSAL METHOD**	REMARKS

CERTIFICATE: I, THE UNDERSIGNED, STATE THAT I AM THE _

OF THE _

(COMPANY), AND THAT I AM

AUTHORIZED BY SAID COMPANY TO MAKE THIS REPORT; AND THAT THIS REPORT WAS PREPARED UNDER MY SUPERVISION AND DIRECTION AND THAT THE FACTS STATED THEREIN ARE TRUE, CORRECT AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

^{*} WATER TYPE: F - FRESH; M - MINERALS; S - SALT

^{**} DISPOSAL METHOD: E - EVAPORATION PIT; I - INJECTION (SAME OR ANOTHER STRATA; SPECIFY); S - SURFACE RUNOFF; R - RIVER, CREEK; O - OTHER (EXPLAIN)